·									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003										10720286					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	- E1	ITITY	OR	OTHER SMALL			
TOTAL CLAIMS			DO				1	RAT	Ε	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASĮC FEE	770.00		
TOTAL CHARGEABLE CLAIMS) minus 20=		· Ø			XS 9)=		OR	XS18=			
INDEPENDENT CLAIMS			minus 3 =		2			X43=			OR	X86=	172		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT)=		OR	+290=			
* 11	the difference	in column 1 is I	less than zero, enter "0"			olumn 2	lumn 2 TOT				OR		942		
CLAIMS AS AMENDED - PART II										l	, •	OTHER	THAN		
	(Column 1) (Column 2) (Column 3)							SMA	LL	ENTITY	OR	SMALL	ENTITY		
NTA		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
N N	Total	•	Minus	**	7	= /1		X\$ 9)=		OR	X\$18=			
AMENDMENT	Independent	nendent • Minus					1	X43	i=		OR	X86=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						_ لِ	+14	<u> </u>		ÓR	200			
									TAL		OR	TOTAL			
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE ADDIT. FEE							
<u> </u> -		(Column 1) CLAIMS	1		HEST	Column	ή.	_	_	ADDI-	1		ADDI-		
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	NBER IOUSLY D FOR	PRESENT EXTRA		RAT	Έ	TIONAL FEE		RATE	TIONAL FEE		
DME	Total	±	Minus	**		=	1.	XS	9=		ОЯ	X\$18=			
REN	Independent	*	Minus	***		-		X43	3=		OF	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						٦	+14	s_		1	.200-			
l L									TAL		OF	TOTAL			
									FEE	L	100	ADDIT, FEI	`		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI													I ADDI		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RA	re ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus .	**		=		X\$	9=		OF	X\$18=			
MEN	Independent	* .	Minus	***		3		X4:	3=	1	OF	X86=			
K	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDE	NT CLAIM		L	-		 	1				
		one distance the co	the selection selection	ume 2 ···	ila "N" in c	otume 3		+14			OF	TOTAL			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									FEE		OF	ADDIT. FE			
"	"If the "Highest No The "Highest Nor	umber Previously F mber Previously Pa	aid For IN Thaid For (Total o	or Indepen	: Is less th ident) is th	an 3, enter 3. e highest num	iber f	ound in (he a	opropriate b	ox in c	column 1.			

FORM PTO-875 (Rev. 10/03)

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